

STATE OF HAWAII
DEPARTMENT OF TAXATION
CHANGE OF ADDRESS FORM

DO NOT WRITE IN THIS AREA

03

NAME: _____

GE/WH/TA/RV ID. NO. _____

PLEASE CHANGE MY:

☐ MAILING ADDRESS TO:

☐ BUSINESS ADDRESS TO:

c/o or "In care of" (If this is to be deleted, please write "Delete")

Street

City/State

Zip Code + 4

Street

City/State

Zip Code + 4

Phone No. () (Business)

() (Residence)

NOTE:

If you would like your withholding and/or transient accommodations and/or rental motor vehicle & tour vehicle surcharge booklet(s) mailed to an address other than the one listed above, please fill out the following:

☐ Add a separate Withholding Tax mailing address:

☐ Change my Withholding Tax mailing address:

☐ Add a separate Transient Accommodations Tax mailing address:

☐ Change my Transient Accommodations Tax mailing address:

c/o or "In care of" (If this is to be deleted, please write "Delete")

Street

City/State

Zip Code + 4

c/o or "In care of" (If this is to be deleted, please write "Delete")

Street

City/State

Zip Code + 4

☐ Add a separate Rental Motor Vehicle and Tour Vehicle Surcharge Tax mailing address:

☐ Change my Rental Motor Vehicle and Tour Vehicle Surcharge Tax mailing address:

c/o or "In care of" (If this is to be deleted, please write "Delete")

Street

City/State

Zip Code + 4

Signature of Owner, Partner or Member, Officer, or
Duly Authorized Agent

Date

Title: Owner, Partner or Member, Officer, or Duly Authorized Agent

— MAILING ADDRESSES —

OAHU DISTRICT OFFICE
P.O. BOX 1425
HONOLULU, HI 96806-1425

MAUI DISTRICT OFFICE
P.O. BOX 1427
WAILUKU, HI 96793-6427

HAWAII DISTRICT OFFICE
P.O. BOX 937
HILO, HI 96721-0937

KAUAI DISTRICT OFFICE
P.O. BOX 1687
LIHUE, HI 96766-5687

THIS SPACE FOR DATE RECEIVED STAMP